

United States Patent and Trademark Office
- Sales Receipt -

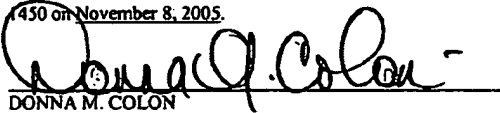
11/18/2005 BDENNY 00000005 062425 10611696

01 FC:2202	625.00 DA
02 FC:2201	400.00 DA



PATENT

RECEIVED
CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8
I hereby certify that this correspondence is being deposited with
the United States Postal Service with sufficient postage as First
Class Mail in an envelope addressed to: Mail Stop Amendment,
Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-
1450 on November 8, 2005.


DONNA M. COLON

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/611,696
Applicant : Budimir Drakulic
Filed : July 1, 2003
Art Unit : 3736
Examiner : Unknown

Docket No.: : RECOM-64414
Customer No. : 24201

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

FOURTH PRELIMINARY AMENDMENT

Dear Sir:

Please enter the following claims prior to examination of the application.

IN THE CLAIMS:

Claim 1 (previously amended) In combination for providing at selective positions
on a patient's skin signals representing the patient's parameters at these positions,

an electrode constructed to be attached to the patient's skin at one of the
selective positions to provide signals indicative of the parameters on the patient's body at
the one of the selective positions,

PATENT APPLICATION FEE DETERMINATION RECORD
Effective January 1, 2003

Application or Docket Number

10/11/96
10611696
RECOM-64414

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	34	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	34 minus 20 =	14
INDEPENDENT CLAIMS	5 minus 3 =	2
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	34	34	
Independent	5	5	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY TYPE ☐

OTHER THAN SMALL ENTITY

RATE	FEE	OR	RATE	FEE
BASIC FEE	375.00	OR	BASIC FEE	750.00
X\$9=	125	OR	X\$18=	
X42=	84	OR	X84=	
+140=		OR	+280=	
TOTAL	585	OR	TOTAL	

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
X\$9=		OR	X\$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL		OR	TOTAL	
ADDITIONAL FEE		OR	ADDITIONAL FEE	

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
X\$9=	54	OR	X\$18=	
X42=	42	OR	X84=	
+140=		OR	+280=	
TOTAL	481	OR	TOTAL	
ADDITIONAL FEE		OR	ADDITIONAL FEE	

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
X\$9=	625.00	OR	X\$18=	
X42=	400.00	OR	X84=	
+140=		OR	+280=	
TOTAL	1025.00	OR	TOTAL	
ADDITIONAL FEE		OR	ADDITIONAL FEE	

11-10-05

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	34	34	6
Independent	5	5	1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.